

MULTIPLE DEPEN.
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

CLAIM

SERIAL NO.

10 / 590352

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
	1	1						51					
2		1						52					
3		1						53					
4		1						54					
5		1						55					
6		1						56					
7		1						57					
8		1						58					
9		1						59					
10		1						60					
11		1						61					
12		1						62					
13		1						63					
14		1						64					
15		1						65					
16		1						66					
17		1						67					
18		1						68					
19		1						69					
20		1						70					
21	C	C						71					
22	1							72					
23		1						73					
24		1						74					
25		1						75					
26		1						76					
27		1						77					
28		1						78					
29		1						79					
30		1						80					
31		1						81					
32		1						82					
33		1						83					
34		1						84					
35		1						85					
36		1						86					
37		1						87					
38		1						88					
39		1						89					
40		1						90					
41		1						91					
42	C	C						92					
43								93					
44								94					
45								95					
46								96					
47								97					
48								98					
49								99					
50								100					
TOTAL IND.	2							TOTAL IND.					
TOTAL DEP.	38							TOTAL DEP.					
TOTAL CLAIMS	40							TOTAL CLAIMS					